

RIASE

REVISTA IBERO-AMERICANA DE SAÚDE E ENVELHECIMENTO
REVISTA IBERO-AMERICANA DE SALUD Y ENVEJECIMIENTO

EDITORIAL

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The year dedicated to nursing by the World Health Organization (WHO) as come to an end. The coincidence between WHO's decision and the appearance of a pandemic like the one we are living through is incredible! This coincidence came to show the relevance of the defined objectives for the *Nursing Now* campaign and above all, its urgency. Otherwise let's see:

- All pandemic prevention measures are, to put it bluntly, a matter of self-care; in this condition, they would profit a lot if they were developed based on a model of proximity care, led by nurses;
- All public health measures for detecting and tracking contagion chains depended largely on nursing and would have much to gain if the services had more nurses;
- Regarding the decisive role of nurses in the context of hospitalization, namely in intensive care, it is not necessary to add much, however, I will always emphasize that the crisis at that level was not a lack of devices, namely ventilators, but essentially of professionals and among them, of nurses. Despite everything, its not that hard to obtain a new ventilator, but it is a hard and long path to educate professionals and to create working teams for those contexts. Had it not been for the selflessness of all of them, and the collapse of services would have been inevitable!
- I note, however, an element that is often overlooked: 95% of people infected with SARS-CoV-2 were at home, dependent of self-care and frequently monitored by nurses. This monitoring was based on models of care and archaic technologies. How much would not we gain in efficiency, efficacy, but above all in health and well-being, if the same was done based on a care model centered on self-care, consequently, led by nurses and supported by modern telecare systems?

In short, the pandemic unequivocally came to expose two complementary dimensions that are of interest in safeguarding any modern society: the importance of a public health service and the centrality of its professionals, namely nurses. But it also exposed the fragility of the services we have, essentially the result of long periods of divestment in the name of blind austerity.

Thus, it remains for us to look at everything we live and draw the necessary lessons from there. In fact, the health and well-being of the population is an investment and not an expense. Consequently, economic development needs to be translated into people's health and well-being, and modern public health services will certainly contribute to this, that is, be capable of responding with resilience and flexibility to current epidemiological conditions through appropriate care models, using the most advanced technological means that the current knowledge allows.

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For all this, we need more nurses but also new models of initial and lifelong training, as well as new professional models that take full advantage of the skills installed, based on teamwork with the other professionals.

Therefore, let us not let the spirit of the *Nursing Now* initiative die, and let's all contribute to a struggle that is not corporate, but for the well-being of people.